



The M10 E-Zine

Naval Reserve Medicine's First Resource for News and Information

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FLAG MATTERS: TAKING CARE OF BUSINESS

**RADM William J. Lynch, MC, USNR,
Deputy Chief BUMED, Reserve Affairs**

The 9th Annual TRICARE Conference was held on January 27-30, 2003 in Washington D.C. Over 3000 military and civilian health care professionals attended this conference to discuss TRICARE programs, policies and initiatives, and to highlight health care achievements for the previous year.

Naval Hospital Pensacola walked away with two awards, winning both the Navy Surgeon General's Mathew J. Bourgeois Muddy Boots Award and the Picker Institute Award for recognition as the number one hospital in the country for continuity of transition of care according to patient surveys. NR Naval Hospital Pensacola is an integral part of the day-to-day mission of this outstanding naval hospital. Congratulations and a "Bravo Zulu" to Captain Hill and all members of the NR Naval Hospital Pensacola for their contributions and support in achieving these coveted awards.

Undersecretary of Defense for Personnel and Readiness, Dr. David S. C. Chu challenged the conference attendees to think not just about immediate issues and concerns, but also those anticipated for 2004. Dr. Chu spoke of the transformation of DoD. He said, "transformation means looking at the new environment in which the military health system operates and responding to it." He went onto to indicate that DoD must focus on increased collaboration and communication across the federal government, such as the collaborative initiatives between DoD and the VA.

Although Dr. Chu did not directly address the Reserve support (backfill if you will) for the MTFs of all three Services, VADM Cowan did address this issue as it pertains to Navy Medicine on two separate occasions. BUMED and OPNAV N931 have developed a communication plan defending

Program 32 to backfill the MTFs as per doctrine. RADM (s) Brannman, RADM Andrus and Captain Nichols from N931 recently briefed Mr. Ford and Ms. Embrey at the Assistant Secretary of Defense (Health Affairs), seeking their support of the Program 32 backfill plan. Support from the MTF Commanding Officers, the Healthcare Support Office (HSO) Commanding Officers and the regional Lead Agents is being focused to help ASD (HA) understand and more clearly see how the Navy SG executes his mission by management of "ALL NAVY MEDICINE" as a single enterprise, "ONE NAVY MEDICINE." The outcome of these discussions remains to be seen. One thing for sure is that our patients will receive the care they need and deserve.



On the opening day of the conference, a distinguished panel of congressional staffers addressed and took questions from the attendees. A significant portion of the remarks addressed the concerns, issues, and policies directing and affecting healthcare benefits of Reserves prior to, during, and after deployment. Congress is keenly aware of the difficulties experienced in the past and is making every effort to remedy them. The presence of these congressional staffers and their supporting remarks is testimonial to the importance of Reserve healthcare issues.

The conference breakout sessions addressed too many important topics to list; however, one topic, which was addressed in four sessions and very important to all, is the Health Insurance Portability Accountability Act (HIPAA). These sessions provided a summary of the implementation of HIPAA requirements, features and timelines within the Military Healthcare System. HIPAA was

Our Mission:

As the Reserve Component advocate of the U. S. Navy Medical Department, M-10, through the "Total Force Integration - One Navy Medicine" concept, promote, manage and lead the integration of the Medical Reserve to support the mission of Navy Medicine.

enacted in 1996 to combat waste, fraud and abuse, improve portability of health insurance coverage, and simplify administration of healthcare. It affects health plans, healthcare clearinghouses, providers (e.g. physicians, MTFs, dental clinics, pharmacies), and business associates. As Naval Reserve healthcare providers, HIPAA will affect us all. I strongly encourage all Naval Reserve medical personnel (Programs 5, 7, 9, 32, and 46) to become familiar with HIPAA. For further information about HIPAA visit the TRICARE HIPAA Newsletter at www.tricare.osd.mil/hipaa. Additional HIPAA information and instructional courses can be obtained through the M-10 SWANK Program <http://swankhealth.com/> and the Centers for Medicare & Medicaid Services' (CMS) site [here](http://www.cms.gov).

As I am writing this article, I am constantly reflecting on the tragic loss of the brave men and women of the Columbia space shuttle on February 1, 2003. The Nation mourns the loss of these heroic patriots of space exploration and grieves for their families. In the days ahead, the Nation may experience the need to mourn and grieve as the war on terrorism unfolds. Many of your colleagues and friends have already received the call to defend our freedom. Many of you yet to be called will eventually have the same opportunity. All of us who wear the cloth of our nation will be called upon, whether through mobilization or through remaining on the drill decks performing IDT, ADT or AT, will rally and support our Commander in Chief. I am extremely proud of all that each and every one of you has done and will do to support Navy Medicine and the Navy. God bless you all. God bless America.



Prayer for Columbia Astronauts

by CAPT Jane F Vierira, Chaplain Corps, USN

Eternal God, we pray for the seven astronauts who gave their lives to further knowledge of space and science to benefit all humanity. They represented the explorer's spirit in each of us. Comfort their families and their NASA colleagues during this time of great tragedy and loss. As they looked down upon the Earth, so small and fixed amidst the splendor of the Milky Way, we pray they felt your presence and even more so as they moved into the encounter at the other end of their lives. May their courage, dreams, spirit of exploration and search for truth continue on in us and for generations to come. Amen.



As we mourn, we honor the efforts of the seven Space Shuttle Columbia crew members that included two US Navy Flight Surgeons, CAPT David Brown and CDR Laurel Clark. Together with their colleagues - COL Rick Husband, LTCOL Colonel Michael Anderson, Navy CDR William McCool, Dr. Kalpana Chawla and COL Ilan Ramon of the Israeli Air Force - these brave men and women gave their lives at great risk in service to all humanity.

High Flight

by John Gillespie Magee, Jr.

Oh, I have slipped the surly bonds of Earth
And danced the skies on laughter silvered wings:
Sunward I've climbed and joined the tumbling mirth
Of Sun-split clouds - and done a hundred things
You have not dreamed of- wheeled and soared and swung
High in the sunlit silence, hovering there
I chased the shouting wind along, and flung
My eager craft through footless halls of air.
Up, up the long, delirious, burning blue
I've topped the windswept heights with easy grace
Where never lark or even eagle flew,
And while with silent lifting mind I've trod
The rich untrodden sanctity of space,
Put out my hand and touched the face of God.

Semper Paratis/Semper Fidelis

By RADM Maurice B. Hill Jr., DC, USNR

As the War on Terror intensifies we need to not only heed the Navy's core values of Courage, Honor and Commitment but we need to embrace the mottos of our sister sea services- the Coast Guard's SEMPER PARATIS- "always prepared" and the Marine Corps' SEMPER FIDELIS- "always faithful". To that end the Reserve dental corps officers and technicians have embarked on an aggressive program employing mobile dental teams to provide exams to improve the dental readiness of our reserve sailors and marines. The success of this program is measurable as we have seen the dental readiness increase steadily across the system. It is also imperative that we not overlook our own mobilization readiness not only medically and dentally but also administratively.



I encourage all of you, both personally and in your leadership capacities to assess your readiness for mobilization and that of your unit's personnel. I encourage you to use the COMNAVRESFOR mobilization guide and check list, which provides a comprehensive method to prepare for activation.

-Make sure that you and your personnel have updated your wills or if you don't have one contact your nearest Navy Legal Office for assistance.

-Make sure that you and your personnel update the beneficiaries on all your insurance policies and pension plans, 401Ks, 403Bs, IRAs, etc.

-If necessary draw up a limited power of attorney so that your spouse or children's guardian can take care of expenses and issues while you are absent. DO NOT MAKE IT A BLANKET POWER OF ATTORNEY. If you have questions please seek guidance from your local Navy Legal Office.

-Single parents and those husbands and wives who are both in the reserves make sure that your guardianship papers are updated and that your children's guardian know the location of your important legal papers should that become necessary.

-Place all important papers such as wills, deeds, automobile titles, savings & checking accounts, brokerage accounts, loan documents, etc in a household safe or bank safe deposit box. Make sure that your spouse or guardian know the location and have access to the safe or bank safe deposit box.

-Above all prepare yourself mentally and physically for mobilization and make sure that your family is prepared for any recall.

We are all proud to serve our country and stand ready to defend our precious freedoms and ideals – anywhere anytime. I have never been prouder of our reserve sailors and marines. It is an honor to serve with all of you. Semper Paratis Semper Fidelis!

Honor, Courage, and



Congressman Kirk aboard Air Force One with the Commander in Chief

From the Naval Reserve Association Legislative Update, Jan 13, 2003

U.S. Rep. Mark Kirk, R-Highland Park, is back in the active Navy Reserve. Kirk left the Active Reserve two years ago, after his election to Congress. Kirk transferred from the Active Reserve to the Individual Ready Reserve, which meant he wasn't required to go on duty once a month.

He switched back to the Active Reserve "because it's what he likes to do," said Dodie McCracken, a spokeswoman. Kirk, a Lieutenant Commander in Navy intelligence, will spend one weekend a month working in the Pentagon, "scanning cables and looking at information coming in," McCracken said. Rep Kirk is a member of the House Appropriation Committee and one of nine Congressmen in a special group working with President Bush on Iraq policy.

CNO Guidance For 2003



From ADM Vern Clark, Chief of Naval Operations

"Last January, I introduced my CNO guidance to align and focus our efforts throughout the year. I challenged each of you to make our great Navy even better by enhancing mission accomplishment, deepening the growth and development of our people, and developing innovative operational concepts and capabilities - - and you delivered!

"This past year has been one of tremendous accomplishment for our Navy. Our Fleet is at a higher state of combat readiness and at the leading edge of the War on Terrorism; we enhanced our commitment to career-long education and training; and introduced the Sea Power 21 vision to align, organize, integrate, and transform our Navy.

"As we enter 2003, we must sustain the outstanding readiness you have achieved while also finding the efficiencies needed to build the Fleet of tomorrow. Therefore, our focus in the upcoming year will be on remaining ready to take swift and decisive action when called upon; protecting our nation, forces, and personnel from enemy attack; and shaping the force of the future by accelerating development of Sea Power 21 capabilities.

"This will not be easy. It will require hard choices and determined leadership at all levels. We must challenge every assumption and search for new and innovative ways to accomplish our tasks and achieve mission success. We will refine requirements; optimally allocate resources; aggressively assess, train, and assign our people; and conduct focused experimentation to rapidly deliver new concepts and technologies to the Fleet.

"I ask each of you, as Navy leaders, to review the guidance and align your commands and organizations toward achieving our goals. I also request you widely share the accomplishments achieved in 2002, the actions for 2003, and our Navy's long-term strategic objectives with your Sailors. It is important that they know the direction our Navy is headed, and understand how their service is enhancing the security of our nation. The complete 2003 CNO Guidance for 2003 is posted at: www.chinfo.navy.mil/navpalib/cno. ISICS will make it available to commands without internet access."

"The Fighting" 106

*CAPT Cindy Dullea, NC, USNR
Commanding Officer, BUMED 106*

Greetings from snowy Washington, DC! The "Fighting 106" has been out and about, both on "the hill" as well as visiting all the Program 32 and 46 commands. This has been a busy quarter as many of the MEDRUP team have been involved with OIC conferences continuing MEDRUPMIS education and expanding their level of involvement and education to include other M-10 activities. We've received requests to speak on SWANK, dream sheet and AT planning, billet/body matching, and a wide variety of agenda items. As MEDRUP continues to become a solid part of the CO/OIC toolkit, the BUMED 106 MEDRUP team members are also undergoing a metamorphosis, becoming subject matter experts (SME) on BUMED and COMNAVRESFOR policies and activities.

BUMED 106 unit members are also fully entrenched on "the hill" working with the various codes. CAPT Chip Rice worked closely with the BUMED team to provide justification to the Undersecretary of Defense for Personnel and Readiness, Dr. David Chu, regarding Reserve mobilization. CDR Leo Kaslavage is presently working with the Customer Relations group on a number of service related issues. CAPT Marylynn Marrese and her team have completed a wonderful homeland and bio-terrorism project in association with OPNAV 931. CDR Myrna Mamaril is working closely with CAPT (sel) Dischner on NC related projects and CDR Gray Woerz is working with CAPT Dale Nanny on DC activities. Additionally, RADM (sel.) Marshall Cusic, CAPT Carl Bazemore, and CDR Gregg Wolff are working with CAPT Steve Frost on MC issues.

As the Apply process comes into full swing, there will be several billets in BUMED 106 advertised. A tour at headquarters is educational for those who have not been to DC and are able to travel and drill at BUMED.

AMSUS Convention

The AMSUS (Association of Military Surgeons of the United States) Conference was held in Louisville, Kentucky in November 2002. The major theme for this year's conference was "relevant and reasonable." Readers can see that delegates from 85 countries were present, numerous exhibits were available, Active and Reserve members from the Navy, Air Force, Army, Public Health Services, VA, and numerous other agencies provided speakers, representatives and attendees.



One of the key aspects of this conference is the valuable networking opportunity for attendees to share ideas, theories and the latest research with peers and other interested observers. After reading the next several articles, You are encouraged to apply for opportunities to attend the 2003 Conference in San Antonio.

Proud to Serve with America's Finest

NAVY SURGEON GENERAL ADDRESSES RESERVE MEDICAL LEADERSHIP AT THE 108TH AMSUS

By LCDR Deborah A. Spulecki, USNR, NR Fleet Hospital Great Lakes, Det. 23



LOUISVILLE, Ky. -- VADM Michael L. Cowan, the Navy Surgeon General, launched the Bureau of Medicine and Surgery Total Force Symposium with energized reflections on readiness to respond to future missions. The Symposium, attended primarily by naval Reservists, was held the weekend prior to the start of the 108th Annual Meeting of the Association of Military Surgeons of the United States (AMSUS), November 10-15, 2002.

Cowan shared that a key to readiness is "flexibility with emphasis on reshaping Navy doctrine from the current way it operates." The size of the military's medical system has to do with numbers required to mount up

medical platforms, which has nothing to do with the numbers of people in our military, according to Cowan.

Critical to the Navy's success, Cowan offered, will be the Navy's ability to establish a family-centered culture, which is a first step in achieving a patient-centered culture. Another critical success factor includes establishing a TRICARE e-Health portal.

"While our strengths have been our serious dedication as professionals, we must continue to address problems associated with patient volume, the ability to manage those patients, adequate numbers of call center operators, and call volume," Cowan said.

To read the entire story, please click [here](#)

Surgeon General Of The U.S. Addresses AMSUS Delegates

By LCDR Deborah A. Spulecki, USNR, NR Fleet Hospital Great Lakes, Det. 23

LOUISVILLE, Ky. -- Empowered by his experiences as an Army Soldier during the Vietnam War, VADM Richard H. Carmona, United States Public Health Service, returned home to pursue his dream to become a doctor.



Carmona recalled his enlisted Army service in his address to the Plenary Session of the 108th Annual Meeting the Association of Military Surgeons of the United States (AMSUS) November 10, 2002.

After serving in the Army's Special Forces, Carmona went on to become an emergency medical technician, a paramedic, a registered nurse, a trauma surgeon, and a professor. All of these experiences, he said, had an unbelievable impact on his ability to become the Surgeon General of the United States.

Previous Surgeon Generals have not had the same military background like Carmona. However, he believes his mandate from the Commander-in-Chief is different; Carmona will focus on a peacetime mission of health promotion and wartime considerations such as homeland security and the war on terrorism.

"Our challenge is to identify, mitigate or control the threat of bioterrorism complicated by the fear of the unknown and weapons of mass destruction," Carmona said.

To read the entire story, please click [here](#)

Commander, Naval Reserve Force Q&A

BUMED TOTAL FORCE SYMPOSIUM WELCOMES COMMANDER,
NAVAL RESERVE FORCE

By LCDR Deborah A. Spulecki, USNR, NR Fleet Hospital Great Lakes, Det. 23

LOUISVILLE, Ky. -- An Admiral's Call held during the Bureau of Surgery and Medicine Total Force Symposium prior to the 108th Meeting of AMSUS in November provided an open forum for medical Naval Reservists to raise concerns.



A panel comprised of BUMED and Naval Reserve Force leadership captured issues to take back to their commands to make the Naval Reserve medical organization a better place.

"We've been talking about leading change for four years and it keeps changing," said VADM John Totushek, Commander, Naval Reserve Force. "The things we are changing now are very important for the Naval Reserve and will benefit you all long after I'm gone," he said.

To read the entire story and to review the entire set of Q&As, please click [here](#)



Relevant Federal Health Care: Topic of Discussion at AMSUS

By LCDR Deborah A. Spulecki, USNR, NR Fleet Hospital Great Lakes, Det. 23

LOUISVILLE, Ky. -- The 108th Annual Meeting of the Association of Military Surgeons of the United States (AMSUS) held November 10-15, 2002, provided attendees with opportunities to discuss the challenges facing Federal Health Care within the context of relevancy to their organizations, to the nation, and to the international community.

Annual Meeting participants enjoyed panel discussions, observed presentations of professional and scientific papers and meet-the-investigator sessions, and viewed films and diversified technical and scientific exhibits. Mid-day options included service and corps specific luncheons. Evening hours provided attendees with opportunities to gather for informal networking in many of Louisville's popular downtown eateries and included a special National Veterans Day Concert by the VA National Medical Musical Group hosted by Bill Kurtis of the A&E Network.

The Exhibition Hall featured more than 200 scientific and technical displays emphasizing pharmaceuticals, diagnostic, laboratory, therapeutic devices and more. These exhibits enabled meeting delegates to take a break from sessions to view highly visual displays exhibiting important information on the development of drugs, chemicals, medical equipment and products relevant to their specialties and interests.

To read the entire story, please click [here](#)



Naval Reserve Medicine Brainstorms During Symposium

By LCDR Deborah A. Spulecki, USNR, NR Fleet Hospital Great Lakes, Det. 23



Breakout sessions held during the BUMED Total Force Symposium enabled various medical programs to brainstorm issues that are working well, those issues not working well and things that should be done differently. Much has been accomplished. Opportunities exist to improve. We're on course!

Naval Readiness Command and NAR Medical Staff – "NOWS has some glitches, however, it is pleasing everyone. It's a nice technological move forward for the Reserves." – CAPT O.W. Dickey, MSC, COMNAVRESFOR

Naval Reserve Fleet Hospital – "We are operational, we are flexible, we are trained and we are ready to support the fleet." – CAPT Sara Karstetter, CO, NR Fleet Hospital Great Lakes

Naval Reserve Dental – "Accurate numbers prove what we're doing. We have a good grasp of our overall dental readiness despite uneven distribution of manpower in the Naval Reserve Dental Corps." – CAPT Art Benson, CO, NR Dental Center, Great Lakes

Naval Reserve Naval Hospital – "People understand that mobilization is a definite possibility given the current world situation. Isolated units may not have enough providers to deliver service, however, we've come up with creative solutions [to ensure readiness.]" – CAPT Dave Mather, CO, NR Naval Medical Center, San Diego.

Naval Reserve Health Promotion Teaches First Course at AMSUS

By LCDR Deborah A. Spulecki, USNR, NR Fleet Hospital Great Lakes, Det. 23

LOUISVILLE, Ky. -- The Naval Reserve Health Promotion program offered its training course to 52 Reservists at the 108th Annual Meeting of the Association of Military Surgeons of the United States (AMSUS), November 9, 2002.

The Naval Reserve Health Promotion Program originated in 1995, however, a course to teach Reserve instructors was offered for the first time at AMSUS. Based upon the Cooper Institute Center for Aerobics principles, the Health Promotions Course teaches students how to establish a Health Promotion Program at their Reserve Centers.

"The goal is to train as many people in Health Promotion as possible to maintain momentum," according to CDR Betty Kole, a Reservist selected for a one-year recall at the Navy Environmental Health Center in Portsmouth, Va.

To read the entire story, please click [here](#)



RADM David Maserang, MSC, USNR and CAPT Jerry Kelly, MC, USNR (not shown here) receive the Legion of Merit Medal for their leadership of the combined NR Fleet Hospital (Dallas/Minneapolis) during a West African Training Cruise medical outreach to 15,000 residents of Ghana and the Republic of Togo in 2002.

Hooray!!!

Secretary of Defense Donald R. Rumsfeld recently announced that President George W. Bush has made the following Flag Officer nominations:

Naval Reserve CAPT Marshall E. Cusic Jr., MC, has been nominated for appointment to the rank of RADM (lower half) while serving as project officer, Professional Schools Liaison Office, Naval Reserve, Bureau of Medicine and Surgery 106, Washington, D.C.

Naval Reserve CAPT Karen A. Flaherty, NC, has been nominated for appointment to the rank of RADM (lower half) while serving as CO, NR Fleet Hospital Fort Dix (New Jersey)

The Apply Program

The Apply interactive web program marks another first in the Naval Reserve and will provide reserve officers applying for billets the latest information...as it becomes available.

In our efforts to respond to requests to streamline the process for applying for senior command and non-command billets, we have moved to an electronic application that will not require any additional information to be mailed. Based on your registration, we will obtain your microfiche records, which include your FITREPs and OSR/PSR information sheets directly from NAVPERSCEN, Millington, TN. Your electronic application will be displayed directly to the board as you entered it.

The keys to a successful application are:

1. Register early - this will allow us to get your information for the board.
2. Apply early - You can review billets at a later date and make changes. You will also avoid the last minute rush - over 5,000 officers apply each year for billets!
3. Check it out - Check the COMNAVSURFRESFOR N12 web site for the latest information.

We encourage you to be an active participant so we can match the right officer with the right billet. Keep the communication coming! For more information and some great FAQs, please click the link below:

www.navres.navy.mil/navresfor/navsurf/staff_codes/N1/applyfy04/index.html

So, What's Your AT Like?

By HM2 Nancy Bediant (mid-way through her AT)

"I am currently in the last part of my stay in Okinawa performing my AT. So, far this has been a wonderful and exciting AT. I would have to say it has been by far the best one I've been on and I have been in the Reserves for almost eleven years now. The RLO's have been more than gracious hosts. They always returned any of my e-mails at first when I was preparing to come. They met us at the airport and had a shuttle with our room keys ready to go to take us back to base.

"When we arrived at Camp Lester, the staff made certain that we were all assigned and into our rooms before they left (and that was at least midnight). The first day was orientation and checking in. The Active Duty staff made sure we felt welcome and that if we had any problems that their door was open. They did not treat us like "we were just Reservists."

"I personally worked in the main Lab and I couldn't keep track of how many times they thanked me for coming and helping them out. It really made me feel useful and not in the way. They also made sure that we had adequate time to do some site seeing on the island. The sites here are incredible and the Island itself has an enormous amount of American military history. Overall, I would comment that this is a tremendous opportunity for anyone in the Reserves."

Help Wanted!



BUMED needs a Fleet Operations Support Reserve Liaison Officer (M3F3) to act as an advisor and liaison to Deputy Chief BUMED, Fleet Operations Support

and to Director, Current Operations and Platform Support. A strong background in Fleet Hospitals desirable for this July 1st, 2003 Fill Date.

NH Pensacola seeks a Reserve Liaison Officer to serve as a special assistant to the Commanding Officer and Executive Officer on all Reserve matters. In this capacity, the RLO would be the point of contact for the Command on Reserve issues. A Medical Department Officer with extensive knowledge of Reserve programs and policies is desirable for this July 1st 2003 Fill Date.

To obtain further information on either of these or more current opportunities, please click here: www.bupers.navy.mil/pers9/pers92/pers921/3recall.htm or call LCDR Eddie Oestreicher, MSC, USNR at DSN 762-3413/ COM (202) 762-3413.

Medical and Dental Requirements for Non-Prior Service Accession Course (NPSAC)

From "The Naval Reservist," January 2003 Almanac Edition

Members should arrive healthy, with medical records stating each Reservist is "fit for full duty." Prospective NPSAC applicants should undergo complete screening with their local Reserve medical department. It is important for recruits, as early as possible, to inform local medical department staff of any medical condition that might prevent them from attending NPSAC. Here are other important considerations:

Students must be physically qualified and prepared to complete all training components during the Non-Prior Service Accession Course.

Due to moderate-risk training requirements for NPSAC classes, members who are not in compliance with Navy physical readiness standards (including body fat) will have their AT orders terminated.

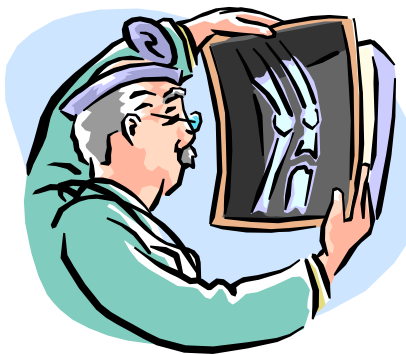
Students in a Temporary Not Physically Qualified (TNPQ) status, except for dental classification, cannot perform the training and WILL NOT be issued orders until their physical condition is resolved.

All students will report with a complete Medical Record (including SF-88 and 93); current HIV (within 12 months); immunization record; G6PD, accurate blood typing, sickle cell trait and summary of care. Women must have a current Pap test within 12 months of reporting to class. Students without appropriate medical documentation will have orders canceled. Completed lab results are required— no "pending" results allowed.

Medical and dental records must show completed examinations and meet NPSAC requirements. Dental class must be stated in a member's dental record. If a member went to a civilian dentist for examination, the dentist must complete DoD Reserve Forces Dental examination form DD-2813 (brought to dentist by member) and this form must be in the member's Dental Record.

Personnel with orthodontic appliances (braces) undergoing active treatment are not authorized to attend NPSAC, per MANMED 15-55.

Per COMNAVRESFORINST 6000.1A, pregnant service women are not authorized to attend NPSAC training. Pregnant service women should notify their Reserve Center concerning their condition so that orders may be canceled or modified appropriately.



Personnel must meet moderate risk medical screening criteria and Navy physical readiness standards. Students must report with medical, dental and body fat measurements annotated in Section 4.C of AT checkout form NAVRES 3500/18 (Rev 08-00).

In addition, other medical conditions noted on the risk factor screening sheet may result in order cancellation, if a doctor determines the member is unable to participate in moderate-risk training. Any conditions requiring waivers must have supporting documents.

For more information, contact NPSAC medical via e-mail to contreras@cnet.navy.mil





Hot News on TRICARE

The TRICARE Handbook is now interactive and available on the TRICARE Web site. With this new functionality, users can search for information on the TRICARE benefit either by subject search, or general search. In addition, you can go right to sections in the Handbook using the interactive Table of Contents (TOC), as well as print out the online version in its entirety. The online version will be updated in real time, as changes occur. A contact e-mail, for help with benefit questions has been added to the site to further assist members in researching TRICARE information. To view the handbook online, click on the link: www.tricare.osd.mil/TricareHandbook/

The TRICARE Handbook explains the TRICARE health care benefit. Numerous updates have been made to the TRICARE program and they are reflected in this version so you can access the latest up-to-date information. As you use this handbook, you might want to cross-reference information with the TRICARE policy manual, the TRICARE Regions, or the TRICARE For Life web sites.

This online version of the TRICARE handbook is a live document and is continuously updated. This version supercedes all printed versions of the TRICARE Handbook. To obtain a hard copy of the TRICARE handbook, please visit your local Military Treatment Facility or TRICARE Service Center.

Medical & Dental Checklist for Reservists

By HMCM(SW) C.J. Lewis, COMNAVRESFOR Force Medical



Medical and dental readiness is crucial. As a Reservist, you need to be ready to report to your mobilization gaining command.

Ensure that your Periodic Physical is current: Every five years to age 49, every two years for ages 50 to 59 and annually for ages 60 and older.

Ensure that you complete the Annual Certificate of Physical Condition (NAVMED 6120/3) each year between periodic physicals.

Ensure you complete your annual dental examination and that you are dental class I or II. If you are found to be dental class III, make sure that you get dental work completed and up to dental class I or II as soon as possible.

If you do not have a dental care plan through civilian work, look at the TRICARE Dental Plan offered to assist you to meet your obligation to be dental class I or II.

You also have the option to purchase the TRICARE Dental Plan for you and your family members. Enroll online at www.uccicom/tdp or call toll-free (888) 622-2256. Ensure all required immunizations are up-to-date.

If you have questions, contact your NRA medical department representative. If you have any medical problems that could prevent or delay you from being mobilized, notify your Naval Reserve Activity (NRA) medical department.

Mentoring

*By RADM William J. Lynch, MC, USNR,
Deputy Chief BUMED, Reserve Affairs*

Everyone in the Navy, both active and reserve, has the opportunity and responsibility to be a mentor to someone else during their career. Most often we see this important process come to fruition as senior officers and enlisted members. One of the most important mentoring tools we have at our disposal is the Navy's unique selection/promotion board process.

Many individuals will, at some time in their naval career, have the opportunity to serve on a selection/promotion board as a recorder or board member. This coveted opportunity allows those individuals to return to their commands/units and utilize the experience and knowledge obtained to mentor and guide their fellow Sailors or Marines. Not everyone will have the opportunity to participate in the Board process. Those who do, owe it to the rest to share the experience and facilitate a high quality mentoring atmosphere within their respective units.

While Board participants are not free to discuss specific material or deliberations, they definitely learn the elements, which make a record strong, and the qualities, characteristics and experiences that get individuals promoted. These are the things Board members need to share with their commands.

Board participation is a wonderful opportunity to do something for others within your commands/units. It carries with it a tremendous responsibility. It should not be taken lightly or perceived as a merely a good fitrep bullet. If you want to help your fellow Sailors or Marines and accept the challenges and responsibilities of being a selection/promotion board recorder or member, then let me know. Take this seriously!

Purple People Eaters

The GAO recently released results from a study titled "Military Personnel: Joint Officer Development Has Improved, but a Strategic Approach Is Needed (GAO-03-238, December 19, 2003)"

The GAO completed the study due to DOD's has increased need and engagement in multiservice and multinational operations. Congress enacted the Goldwater-Nichols Department of Defense Reorganization Act of 1986, in part, so that DOD's military leaders would be better prepared to plan, support, and conduct joint operations. GAO assessed DOD actions to implement provisions in the law that address the development of officers in joint matters and evaluated impediments affecting DOD's ability to fully respond to the provisions in the act.

What the GAO recommends is that the Under Secretary of Defense for Personnel and Readiness develop a strategic plan that links joint officer development to DOD's overall mission. This plan would identify the number of joint specialty officers needed, provide for the education and assignment of Reservists who may serve in joint organizations, and be developed to provide more meaningful data to track progress made against the plan. To review the report in its entirety, please click: www.gao.gov/new.items/d03238.pdf

Uniform Regs Change

*Released by VADM P. A. Tracey
Director, Navy Staff*

Navy grooming and personal appearance policy is intended to ensure that navy personnel set and maintain the highest standards of professional appearance in uniform. Due to the increasing popularity of body art and ornamentation, Navy policy is being revised to provide clearly defined guidance.

The Chief of Naval Operations approved significant revisions to the Navy personal appearance policy. These changes are effective immediately and will be reflected in the next change to uniform regulations. The revisions include:

- Establishment of a tattoo policy for navy personnel.
- Clarification of personal appearance policy with regard to intentional mutilation of body parts.
- Clarification of personal appearance policy with regard to dental ornamentation.

Please refer to R 242055Z JAN 03 ZYB MIN PSN 526968S36 to review details regarding the new policy guidance, which will also be included in the civilian clothing policy, article 7101.

Get Your W-2's Online!

From the Defense Finance Accounting Service

Service members seeking to get a jump on tax filing should be able to download W-2 wage statements from the Internet no later than Jan. 31, pay officials say. Wage and tax statements for the 2002 tax year are due to be online by then for active-duty Air Force, Army and Navy personnel. Active-duty Marines should find W-2 forms online about Jan. 8, under target dates provided by the Defense Finance and Accounting Service.

W-2s for Air Force, Army and Navy reservists and National Guard members were due to be online about Jan. 2, and forms for Marine Corps Reservists were due to go online about Jan. 8, officials said.

Cathy Ferguson, a DFAS spokeswoman, said those dates "aren't written in stone," but "they are what we think is workable."



Federal rules require all W-2 forms to be online by Jan. 31, Ferguson said. Form 1099-R statements for military retirees and annuitants were due to be online by Jan. 1, she said.

The tax statements, required for filing income tax returns, are online at the Defense Department's official pay site at: <https://mypay.dfas.mil/> Active-duty and reserve members will be able to view and print current W-2s and those from up to four years ago. "Everyone will still get hard-copy W-2s and 1099-RS as well," Ferguson said.

DFAS pays about 5.7 million people each month, and 1.3 million have used the secure online pay site. Along with tax data, the site lets service members manage many routine military finance actions online, such as changing tax withholdings and allotments and updating bank and address data.

Change to the Time Limitation for Montgomery GI Bill Usage

Want to receive your Leave and Earnings Statement on line? Call DSN 580-5122 or COM (800) 522 5122 for instructions.

Good News! The time limitation period for members to use Montgomery GI Bill-Selected Reserve (MGIB-SR) educational benefit entitlement has changed from ten years to 14 years from a member's date of basic eligibility. The amendment is effective 1 October 2002 and is applicable to members with a date of basic eligibility on or after 1 October 1992. For members with a date of basic eligibility before 1 October 1992, the 10-year limitation period for benefit usage remains.



The current DD form 2384-1, Notice of Basic Eligibility (NOBE), will continue to be issued electronically via NSIPS until the department of defense issues an updated and modified NOBE. Pen and ink changes to the NOBE are not authorized. The Veterans Administration (VA) will accept the current NOBE for those members that are currently eligible, and for those members that gain eligibility and apply for benefits before a new NOBE is available.

The statement of understanding (SOU) has been modified to reflect this change and is available for download from Commander, Naval Reserve Force MGIB-SR web site at <http://www.navres.navy.mil/navresfor/n1/mgib-sr.html>. There is no requirement to reissue the modified SOU to members that have been previously counseled and have signed a SOU. Utilize the modified SOU for all new Naval Reserve affiliates.

For further information contact COMNAVRESFOR N122 at: (800) 621-8853 or visit: www.gibill.va.gov/education/c1606.htm

Farewell Message From The 72nd Secretary Of The Navy

Released by the Honorable Gordon R. England, Secretary Of The Navy

"In leaving this wonderful institution, I am reminded that we in the naval service are heirs to 227 years of history in which Sailors and Marines live and perpetuate our most cherished treasure patriotic duty to America. To all the men and women in this great service - military and civilian alike - you personify a tireless American spirit that finds hope on every new horizon.

"Your service to America's purpose and security is as vital as ever. Today, we face an unprecedented array of difficult and dangerous challenges around the world. Following our strong president, Americans everywhere are rising to this historic moment using diplomatic, financial, humanitarian, and, when necessary, our military might to protect and advance human dignity and freedom.



"Everyday when I walk into my office, three paintings constantly remind me of the life of consequence that you have chosen. On one wall is a rendition of USS Constitution - old iron - engaged in the U.S. Navy's first major victory at sea in the war of 1812. When I look up from my desk, I see fleet admiral Chester Nimitz standing on the deck of USS Missouri as if he is carefully watching the decisions made in this office. Finally, behind my desk is a painting that depicts brave Marines and the Navy Hospital Corpsman raising the American flag at Iwo Jima.

"Coincidentally, my office faces the Iwo Jima Memorial. Felix de Weldon, the memorial's renowned sculptor, best captured our nation's challenges and the Americans who rise to meet them when he said, "fortunately for this great nation of ours, we have been blessed through heritage and tradition by a limited number of great men, thus far adequate in numbers to our nation's needs in time of great stress." His words still ring true today for those who wear the cloth of the nation and the two strong leaders of this Department, the Chief of Naval Operations, Admiral Vern Clark and the new Commandant of the Marine Corps, General Mike Hagee. With them in your vanguard, Admiral Clark and General Hagee are shining champions who deal hope for all of us. This team tradition is the lasting legacy of Admiral Clark and General Jim Jones, General Hagee's predecessor.

"From old iron to enduring freedom, brave Americans never rest in defending our ideals, principles, and values. For that noble duty, I thank you. As your spirit is tireless, my gratitude is timeless. I will worry about you when you face danger and I will salute you when you prevail. I will marvel at your achievements and I will gain strength from your example. But after all is said and done, I will miss you. God bless you and your families, God bless the Department of the Navy and God bless America."

New Acting Secretary of the Navy



Secretary of Defense Donald Rumsfeld announced today that Susan Morrissey Livingstone is stepping down as Acting Secretary of the Navy. Hansford T. (H.T.) Johnson was appointed by President George W. Bush to be Acting Secretary of the Navy on February 7, 2003, after serving 18 months as the Assistant Secretary of the Navy (Installations and Environment). Mr. Johnson has over 43 years of service to our nation in front-line leadership and planning experience in the military, public, and business sectors.

H.T. grew up in Aiken, S.C., attended Clemson College, and was the outstanding graduate in thermodynamics and aeronautics in the first class (1959) of the U.S. Air Force Academy. To read his entire biography, please click here:
www.chinfo.navy.mil/navpalib/people/secnav/secnavpg.html

Online Certified Medical Education Units Available 24/7

Bookmark a link in your favorite browser to the leading provider of distance learning available now to all officer and enlisted medical personnel. SWANK Healthcare Services enables service members to complete medical professional coursework online for CME credit. Subject matter available for study includes Homeland Defense and Readiness Training, Health Promotions, Chemical and Biological Warfare and much, much more. Login to SWANK at www.swankhealth.com and proceed to the Healthcare Services section. SWANK offers medical Naval Reservists the opportunity to take advantage of online training in relevant topics for professional and personal development, anywhere, and at anytime, 24 hours a day, seven days a week.

Attention Reservists!

Want to earn up to **90 RETIREMENT POINTS** per year for completing online CME courses in 3 easy steps ??? Read on...

1. Visit the SWANK Healthcare Program for CMEs at:
www.swankhealth.com
2. First time users contact your site coordinator or Kathy Blumfelder and Stephanie Curtis at: (800) 950-4248.
3. Complete three hours of CME to obtain one retirement point.
4. Send a Memo or Fax with three completed courses in a bundle to receive one retirement point -Fax: (504) 678-1760/1846/8779. Format with the following information:

From: Individual Reservist (Name, SSN, Unit)
To: Commander, Naval Reserve Personnel Center (N33)
Address: 4400 Dauphine Street
New Orleans, LA 70149
Subj: RETIREMENT POINTS

Enclosed you will find three completed courses with certificates for verification purposes.

5. Provide a closing remark and sign your name.

It's that EASY to earn retirement points AND continue education at the same time!!!!

Note: Please send special instructions if the courses have a higher value of CME/CEUs (for instance, CBRNE Courses, etc).

Reaching for the Stars

By LCDR Eddie Oestreicher, MSC, USNR

The SWANK HEALTHCARE system for online training is quickly gaining popularity by Naval Reservists. A major step by COMNAVRESFOR Command has been signing the "recent" interim guidance allowing for drill credit and retirement point credit. The retirement point credit requires the completion of three hours worth of training to qualify for one retirement point. The drill credit issue is being worked and will be forthcoming.

So far, 8,244 registered participants have viewed 1,365 programs and tested. On the Homeland Defense, Readiness Training & CBRNE programs, we're proud to note that 2,314 Reservists have viewed and 586 have tested!

Congratulations!

Joan Reisdorfer of FH Minneapolis is this January's winner for completing 16 CME courses through the Swank Healthcare website! Joan your prize is on the way. The February winners will soon be announced.



You Too Can Be a Winner!

By Kathy Blumfelder
SWANK Health Care Services

During the month of March you can WIN Special Movie Prizes by simply completing CME Credits!!!!

SWANK Healthcare will be conducting a usage contest during the month of March for ALL Naval Reservists. The following prizes will be awarded to the top three individuals with the most post-tests completed (total tests completed must exceed seven):

- | | |
|------------|--------------------------------------|
| 1st Place: | Mystery Movie Basket |
| 2nd Place: | Movie (DVD or VHS) + 2 Movie Tickets |
| 3RD Place: | Movie (DVD or VHS) + Movie Poster |

Hurry!!! Contest ends March 31st, 2003.

The Editor Speaks Out! This could be YOUR Board

By CDR Rusty Stiles, MSC, USNR & LCDR Eddie Oestreicher MSC, USNR

A hallmark of any Officer's career is promotion. As SELRES we all work hard to maintain professional standards, training, and meet our superiors expectations with regard to performance of our duties. Finally, the time has come for you to go before the promotion board. You also know that successful candidates (your competition) will have reviewed their records, updated any missing information, and sent forward a recent photograph. You have personal satisfaction believing that everything under your control has been done, and believe yourself to be a strong candidate for promotion.

Behind the scenes and well in advance, M10 has collaborated with BUPERS to ensure qualified Officers (other SELRES) have been selected to sit on your board. Many of these Officers have orders to report to the board and will be traveling from various places to perform their very important duty.

Unknown to you (in this fictitious scenario), a serious undercurrent of non-compliance is occurring in parallel with your efforts. Many of the Officers selected to sit for your board rescind their offer or request cancellation of orders to the board. The drop out rate begins to reach critical mass with all attempts to find alternates unsuccessful. As such, BUPERS has no choice but to cancel the board, thereby delaying your look at rightful promotion.

What if this was YOUR board? How would you like to wait another six months to be considered for promotion? While the outcome of the above-described scenario has not happened to date, there have been some close calls. Simply put, we all depend on SELRES who committee to these boards to make every effort to honor their commitments. Most of the time, our Reservists answer the call resoundingly. Without honoring these commitments, we're all sunk.

Want to know what it takes to put a board together...

The Board Process Explained

By LCDR Eddie Oestreicher MSC, USNR

The promotion board process begins with BUPERS advertising the dates of the various promotion boards. Generally, boards are conducted in February for Medical SELRES. In 2003, promotion boards were combined to assess LCDRs, CDRs and CAPTs. This "new" development required additional members and recorders for each specific board.

The second step in the process involves M10-1 (Personnel and Manpower Management) advertising for participants to serve on the board. This initial message is sent to COs in June/July. Advertisements occur on the BUPERS website and additional advertisements are placed in the M10 E-zine.

The nomination process is computerized and can be found at: <http://navymedicine.med.navy.mil/med07> beginning in June/July. Individuals interested in submitting their application should go to the M10-1 webpage and fill out the application. In the month of September/October nominations are reviewed and selections are submitted to BUPERS.

Personnel interested in applying for boards need to understand that there are various roles that are necessary for each Corps' board. Roles defined for each board include assistant recorders, recorders, and members of the board. Generally, the assistant recorders are LCDRs and below. Recorders are CDRs and committee members are CAPTs. A person applying for a position on the board needs to allow ample time to properly notify their employers. Reservists applying for recorder and assistant recorders should allocate 18 days for their commitment. Committee members must allow for 10 days for their orders. Additionally, orders will be generated from BUPERS and these orders are supported by UCMJ (Uniform Code of Military Justice) stipulations for reporting and performance.

Then, M10-1 reviews the applications and ensures that members will not be in zone for promotion. Committee members, recorders, and assistant recorders will then be nominated to BUPERS by M10-1. In 2004, board members will immediately be sent an email to verify availability and the understanding of roles and responsibilities of being on the board. The M10-1 staff will obtain all confirmed nominations and forward the "approved" committee participants to BUPERS. BUPERS will process the nominations and contact the members of the promotion board. Orders will be generated and members will receive appropriate information concerning the uniforms, lodging and flight information.

Finally, the promotion board convenes and selects the packages of SELRES that meet the requirements for each grade. Each participant on the board is sworn under penalty to maintain silence about selections until the official results are published. This overview of the process provides a high-level perspective for SELRES interested in participating on promotion boards.

MEDRUP Update

MEDRUP Success Story from Okinawa, Japan

Recently, Naval Hospital Okinawa needed 25 Reservists to provide backfill as the MTF staff participated in a field exercise for training. Fleet Hospital Great Lakes (FHGL) was tasked to support the MTF.

The FHGL Headquarters Training Officer, CDR Susan Hopkinson, serve as the Action Officer to provide liaison between the MTF and the Reserve Unit. The request for personnel to fill billets was disseminated to all unit members through three chains of communication: the OICs, detachment Training Officers, and Directors.

For some specialties, the specific Department Head was utilized to contact each of the department members directly. Members were referred to the MTF RLO to apply for billets and the FHGL TO was copied on all correspondence.

In MEDRUPMIS, the TO could track the progress of matching personnel into billets. Members of all three chains of command were updated periodically as to what billets remained unfilled. In addition, BUMED was kept informed of billets that FHGL was unable to fill.



Everyone in the unit worked together as a team to identify and bring together members to provide support for Naval Hospital Okinawa.

And the Oscar Goes To...

The Medical Reserve Utilization Program (MEDRUP) Movie is in final production for release 28 February. The movie has three parts: MEDRUP for All Hands, MEDRUP for Unit Leadership, and MEDRUPMIS Reporting and Data Entry. MEDRUP for All Hands will be delivered as an all-hands GMT evolution. Watch for it on your local small screen (computer CRT).

Concentration of Forces

MEDRUP policies have the desirable effect of concentrating the periods of Reserve ATs into those time periods and places that are most needed by the active duty as follows:

1. Reserve Annual Training (AT) support (measured in actual man-days executed) at CONUS MTFs increased by 9 percent from FY01 to FY02. Direct Reserve Medical support at OCONUS MTFs increased 32percent.
2. Reserve AT support achieved concentrations of effort that more closely aligned with MTF overall mission requirements as described by the following events:
 - NNMCM Bethesda (July): Over the course of Baltic Challenge, drew in 330 Reservists, with 300 of them coming from the Bethesda unit alone.
 - NH Portsmouth (Aug): During training at the Fleet Hospital Operational Training Command, drew in 60 Reservists of their own plus 30 additional from other units.
 - NH Camp Lejeune (Feb): Drew 70 Reserve Medical resources to augment their mobilization.
 - NH Bremerton (Feb): During an Operational Readiness Exercise (ORE), drew 70 Reservists of their own plus 50 additional from other unit.
 - NMC San Diego (Apr and Jul): Drew 50 Reservists of their own plus 40 Reservists from other units to directly support USNS Mercy Exercise (MERCEX) I. An additional 150 Reservists were drawn to support MERCEX II.
 - NH Pensacola (Aug): In support of their pre-ORE, drew 110 Reservists of their own plus an additional 60 from other units. The following October they drew an additional 100 Reservists.